

10/31/01

12-03-01

A

Please type a plus sign (+) in this box ☒ PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	WOK-101 (23031-001.01)
First Inventor or Application Identifier	Aubrey Lee Ingram, et al.
Title	Systems and Methods for Providing Employment Management Services Over a Network
Express Mail Label No.	EL719919324US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)	
2. <input checked="" type="checkbox"/> Specification (referred arrangement set forth below) [Total pages 37]	
<ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R&D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113)	(Total Sheets 7)
4. <input type="checkbox"/> Oath or Declaration (Unexecuted)	(Total Sheets 2)
a. <input type="checkbox"/> Newly executed (original or copy)	
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63 (d)) (for continuation/divisional with Box 16 completed)	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application see 37 C.F.R. § 1.63(d)(2) and 1.33(b)	

*** NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27) EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

ADDRESS TO	Assistant Commissioner to Patents Box Patent Application Washington, DC 20231
5. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
a. <input type="checkbox"/> Computer Readable Copy	
b. <input type="checkbox"/> Paper Copy (identical to computer copy)	
c. <input type="checkbox"/> Statement verifying identity of above copies	

ACCOMPANYING APPLICATION PARTS

7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
8. <input type="checkbox"/> (37 C.F.R. § 3.73) Statement (when there is an assignee)	<input type="checkbox"/> Power of Attorney
9. <input type="checkbox"/> English Translation Document (if applicable)	
10. <input type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449	<input type="checkbox"/> Copies of IDS Citations
11. <input type="checkbox"/> Preliminary Amendment	
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
13. <input type="checkbox"/> *Small Entity Statement(s) (PTO/SB/09-12)	<input type="checkbox"/> Statement filed in prior application, Status still proper and desired
14. <input type="checkbox"/> Certified Copy of Priority Documents(s) (if foreign priority is claimed)	
15. Other	

16. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	Customer No: 25181 (Insert Customer No. or Attach bar code label here)	<input type="checkbox"/> Correspondence address below
Name	Daniel P. Gaudet PATENT DEPARTMENT	
Address	FOLEY, HOAG & ELIOT, LLP One Post Office Square	
City	Boston	State MA Zip Code 02109-2170
Country	US	Telephone (617) 832-1000 Fax (617) 832-7000

Name (Print/Type)	Daniel P. Gaudet	Registration No Attorney/Agent	48,584
Signature	<i>Daniel P. Gaudet</i>	Date	October 31, 2001


Burden Hour Statement: This form is estimated to take 0.2 hour to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time your are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner of Patents, Box Patent Application, Washington, DC 20231.

PATENT APPLICATION CLAIMS SHEET Atty.Docket Number

Foley, Hoag & Eliot, LLP
Patent Group
One Post Office Square
Boston, MA 02109-217

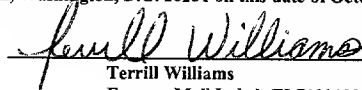
WOK-001.01
(23031-101)

CLAIMS AS FILED

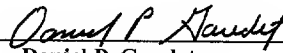
		NUMBER FILED	NUMBER EXTRA	RATE	FEE
BASIC FEE (37 CFR 1.16(a))				\$710.00	\$740.00
TOTAL CLAIMS (37 CFR 1.16(c))		45-20=	25	x \$18	450.00
INDEPENDENT CLAIMS (37 CFR 1.16(b))		2-3=	0	x \$80	
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.16(d))		\$0	
* NUMBER EXTRA MUST BE ZERO OR LARGER			TOTAL		\$1,190.00
	If applicant has small entity status under 37 CFR 1.9 and 1.27 then divide total fee by 2, and enter amount here.			SMALL ENTITY	\$595.00

Certificate of Express Mail

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, postage prepaid, "Post Office to Addressee", in an envelope addressed to the Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231 on this date of October 31, 2001.



Terrill Williams
Express Mail Label: EL719919324US
Date of Deposit: October 31, 2001



Daniel P. Gaudet
Reg. No. 48,584

009914 0310
FOI b7E b7C b7D